

Electronic Acknowledgement Receipt


EFS ID:	1470553
Application Number:	09237291
International Application Number:	
Confirmation Number:	9391
Title of Invention:	EXPANDED AND GENETICALLY MODIFIED POPULATIONS OF HUMAN HEMATOPOIETIC STEM CELLS
First Named Inventor/Applicant Name:	JUDY CAROL YOUNG
Customer Number:	1095
Filer:	Jeffery P. Bernhardt/Ann-Ellice Parker
Filer Authorized By:	Jeffery P. Bernhardt
Attorney Docket Number:	SYS-2068
Receipt Date:	26-JAN-2007
Filing Date:	25-JAN-1999
Time Stamp:	20:47:12
Application Type:	Utility

Payment information:

Submitted with Payment	yes
Payment was successfully received in RAM	\$910
RAM confirmation Number	1165
Deposit Account	502319
The Director of the USPTO is hereby authorized to charge indicated fees and credit any overpayment as follows: Charge any Additional Fees required under 37 C.F.R. Section 1.16 and 1.17	

File Listing:

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: <u>02/20/08</u>		2 Serial/Patent # <u>09/237,291</u>			
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
	Filing			\$	
	Amendment			\$	
	Extension of Time			\$	
	Notice of Appeal/Appeal			\$	
X	Petition	wfee	01/26/07	\$ 400.00	
	Issue			\$	
	Cert of Correction/Terminal Disc.			\$	
	Maintenance			\$	
	Assignment			\$	
	Other			\$	
			7 TOTAL AMOUNT OF REFUND		\$ 400.00
			8 TO BE REFUNDED BY:		
			Treasury Check		
			X	Credit Deposit A/C #:	
			9	5	0 -- 2 3 1 9
10 REASON:					
	Overpayment				
	Duplicate Payment				
X	No Fee Due (Explanation):				
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: <u>Sherry D. Brinkley</u>		TITLE: <u>Petitions Examiner</u>			
SIGNATURE: _____		PHONE: <u>2-3204</u>			
OFFICE: <u>Petitions</u>					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****					
APPROVED: <u></u>		DATE: <u>2/20/08</u>			

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

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